									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								)	10	8.>	×04	03	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OF	OTHER		
TOTAL CLAIMS						:		RATE	FEE	7	RATE	: FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE 385.0	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		•			X\$ 9=		OR	X\$16=		
Ļ.	EPENDENT C	<del></del>		iaus-3 =	•			X43=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	-290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							,	TOTAL	- 1385	OR	TOTAL		
CLAIMS AS AMENDED - PART II									-4-4-4	_	OTHER	THAN	
4	18/05 (Column 1) (Column 2) (Column							SMAL	LENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAI FEE		RATE	ADDI- TIONAL FEE	
	Total	• 18.	Minus	;	20.	=		XS 9=	_  _	OR	· XS18≥		
	Independent • 2 Minus .  FIRST PRESENTATION OF MULTIPLE DEPI			. see	3			X43=		OR	X86=		
	THE THE DEPENDENT COMM							+145=		OR	+290=		
								TOTA		OR	TOTAL ADDIT, FEE		
1/22/05 (Column 1) (Column 2) (Column 3)											ADDN. 1 EE 1		
AMENDMENT B		CLAIMS . REMAINING AFTER AMENDMENT		HIĞHE NUMB PREVIO PAID:F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 18	Minus	- 2	0	=		X\$ 9=		OR	X\$18=		
	Independent	NTATION OF MI	Minus		CLAIM	= _		X43=		OR	X86≂		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		
								TOTAL		OR	TOTAL ADDIT. FEE		
		•		•	•	•							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		<b>=</b> .		X\$ 9=		OR	X\$18=		
AME	Independent	•	Minus	***		=	T	X43=		OR	X86=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1		<b>†</b>	1 1	- 600		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145=	<del>  </del>	OR	+290=		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  ADDIT. FEE										OR ,	DDIT. FEE		
		ber Previously Paid					toun	d in the as	ppropriate bo	ix in coli	umn 1,		